

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization) <u>CITIZENS FOR NIKY BOWLES</u>	
IMPORTANT: Indicate type of committee you are reporting for: <u>4</u>	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates	
CANDIDATE COMMITTEES ONLY:	
Candidate Name <u>NIKY BOWLES</u>	Political Party <u>REPUBLICAN</u>
Office Sought <u>MAYOR OF DAVENPORT</u>	District (if Senate or House) _____
SIGNATURE OF TREASURER (or person filing this report): <u>Thomas Bowles</u>	
(563) 355-2162 TELEPHONE	

FORM DR-2 (Rev. 01/2001)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	
Indexed _____	
Audited _____	
Computer _____	

5-8-08
DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:I AM FILING A NOTICE OF DISSOLUTION REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
(report date)Indicate one 2☐ CHECK IF AMENDMENT TO REPORT DATED _____☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

SCOTT**STATEMENT OF CASH ON HAND**CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)\$ 268.85**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) _____

Schedule F: Loans Received total (Attach Schedule F) _____

Schedule H: Total Sales of Campaign Property (Attach Schedule H) _____

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$

268.85**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)...

Schedule F: Loan Repayments total (Attach Schedule F) _____

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) _____

\$ 0

**UNPAID BILLS (From Schedule D - Attach Schedule D) _____

\$ 0

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) _____

\$ 0

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) _____

\$ 15,998.06**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

YES X NO\$ 0

(including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CITIZENS FOR NIKY BOWLES

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
	ID# CK#			\$ 0	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
SUB-TOTAL				\$ 0	
TOTAL (if last page of this schedule)				\$ 0	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS FOR NIKY BOWLES

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID#			
	CK#			\$ 0
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
SUB-TOTAL				\$ 0
TOTAL (if last page of this schedule)				\$ 0

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS FOR NIKY BOWLES

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
			\$ 0
SUB-TOTAL			\$ 0
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 0

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1
(for Schedule D)

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

CITIZENS FOR NIKY BOWLES

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 16,266.91

SCHEDULE F (Rev. 08/98)	LOANS RECEIVED & REPAYED
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$ 0

TOTAL (PART I) \$ 0

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
5-8-08	THOMAS J. BOWLES 6401 Utica Ridge Rd #36 DAVENPORT, IA 52807	Spouse	\$ 268.85

TOTAL CASH REPAYMENTS (PART II) \$ 268.85

From Schedule E -- TOTAL LOANS FORGIVEN \$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 15,998.06

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(for Schedule F)

May 08 08 12:17p

Niky Bowles

563 355 8419

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May 08 08 12:17p
MISSISSIPPI

Valley Credit Union

4206 - 5th Avenue, Rock Island, IL
17th Ave. & Kennedy Dr., East Moline, IL
2101 - 52nd Ave., Moline, IL (Outside SouthPark Mall)
The Credit Union Place, SouthPark Mall, Moline, IL
89 - 9th Street, Silvis, IL

Niky Bowles

Web Address: www.ihmvcl.org

(309) 793-6200 FOR ALL LOCATIONS

350 Washington Street, Prophetstown, IL
2102 E. Kimberly Road, Davenport, IA
2830 AAA Court, Bettendorf, IA
1631 11th Street, Davenport, IA 52740
3646 W. Kimberly Road, Davenport, IA

563 355 8419

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MEMBER TRANSACTION RECORD

SUFFIX ACCOUNT DESCRIPTION

01 - 12 MONTH CERTIFICATE SAVINGS	05 - 12 MONTH CERTIFICATE SAVINGS
02 - 24 MONTH CERTIFICATE SAVINGS	06 - 24 MONTH CERTIFICATE SAVINGS
03 - 36 MONTH CERTIFICATE SAVINGS	07 - 36 MONTH CERTIFICATE SAVINGS
04 - 48 MONTH CERTIFICATE SAVINGS	08 - 48 MONTH CERTIFICATE SAVINGS
09 - 60 MONTH CERTIFICATE SAVINGS	09 - 60 MONTH CERTIFICATE SAVINGS
10 - 72 MONTH CERTIFICATE SAVINGS	10 - 72 MONTH CERTIFICATE SAVINGS
11 - 84 MONTH CERTIFICATE SAVINGS	11 - 84 MONTH CERTIFICATE SAVINGS
12 - 96 MONTH CERTIFICATE SAVINGS	12 - 96 MONTH CERTIFICATE SAVINGS

SHSH Journal Voucher

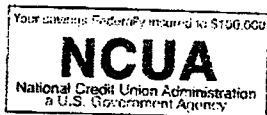
05/08/08 11:11AM

24256 3 219 GRF BR:0011

70076023-10 CITIZENS FOR NIKY BOWLES/ EFF DT:05/08/08 395790
BEG BAL: 268.85 AMT: -268.85 FROM FREE THRIFT CHECKING
MEMB FEES: .00 NEW BAL: .00

70076023-0 CITIZENS FOR NIKY BOWLES/ EFF DT:05/08/08 395790
BEG BAL: 26.13 AMT: 268.85 TO REGULAR SHARE ACCT
MEMB FEES: .00 NEW BAL: 294.98

Bill Payer Now Available
You're worth more at IHMVCL



We are delaying the availability of \$_____ from this deposit. These funds will be available on the _____ business day after the day of your deposit or _____.

(If you did not receive this notice at the time you made the deposit and the check you deposited is paid, we will refund to you any fees for overdraft or returned checks that result solely from the additional delay that we are imposing. To obtain a refund of our fees, visit or call our Rock Island office State Draft Department or call 793-6200.)



P.O. Box 1010
Moline, IL 61266-1010
www.ihmvcu.org

MULTI-FACTOR AUTHENTICATION

Have you updated your login yet? As of March 25th, all online branch users will be required to log in using the Multi-Factor Authentication. This is an additional layer of security that is designed to further protect your financial information. See our home page for details. Make your update today!

37574- 37574

CITIZENS FOR NIKY BOWLES
6401 UTICA RIDGE RD
UNIT 36
DAVENPORT IA 52807

YOUR STATEMENT OF ACCOUNTS

01/01/08 THRU 03/31/08

YOUR ACCOUNT NUMBER

70076023

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For questions and account information
call 1-309-793-6200.

SUFFIX:00 REGULAR SHARE ACCT

BEGINNING BALANCE 26.13
TRUTH IN SAVINGS INFORMATION
BALANCE RANGE RATE APY
.00 - 2,499.99 0.7500% 0.7526%
2,500.00 - 24,999.99 1.0000% 1.0046%
25,000.00 - 9,999,999.99 1.2500% 1.2572%
ANNUAL PERCENTAGE YIELD 0.7526%
JOINT OWNERS: NIKY AND THOMAS J BOWLES
NO ACTIVITY THIS PERIOD FOR THIS SHARE ACCOUNT

TAX INFORMATION BELOW:

REPORTING SSN: ###-##-1582 Y-T-D DIVIDENDS: .00

SUFFIX:10 FREE THRIFT CHECKING

TRUTH IN SAVINGS INFORMATION
BALANCE RANGE RATE APY
.00 - 9,999,999.99 0.0000% 0.0000%
ANNUAL PERCENTAGE YIELD 0.0000%

BEGINNING BALANCE 268.85
DEPOSITS .00
DRAFTS .00 TOTAL NUMBER DRAFTS CLEARED 0
MISC DEBITS .00
MAINT/SERVICE CHGS .00
ENDING BALANCE 268.85

JOINT OWNERS: NIKY AND THOMAS BOWLES

TAX INFORMATION BELOW:

REPORTING SSN: ###-##-1582 Y-T-D DIVIDENDS: .00

FOR 2008 REPORTING SSN	* IRA YTD DIVIDENDS	* OTHER YTD DIVIDENDS	* TOTAL YTD DIVIDENDS	* TOTAL YTD WITHHOLDING	* TOTAL YTD FORFEITURES
###-##-1582	.00	.00	.00	.00	.00

2008 MAY -8 PM 12:45

IA ETHICS AND
COMPLIANCE